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The Consequences of Restricted Health Care Access for Immigrants: Lessons from Medicaid and SCHIP ........ Janet M. Calvo, J.D. 175
This article explores the serious public health and health system concerns that arise from the exclusion of immigrants from health care access reform. Specifically, the author explains how Medicaid and SCHIP restrictions limit healthcare access for eligible citizens, undermine the functioning of the healthcare system, and hinder public health goals. These public health goals include: controlling contagious diseases, reducing infant mortality, and coordinating chronic disease care. Ultimately, the author concludes that providing health care access for noncitizens would further public health goals and implement a more rational and cost effective healthcare system.

Immigrant Access to Health Care and Public Health: An International Perspective .......... Sana Loue, J.D., Ph.D., M.P.H. 213
This article considers the extent of international migration and associated concerns for the public health and advocates for an international perspective on the provision of health care to migrants. After discussing factors affecting the health of immigrants and exploring the role of public health, this article focuses on immigrant access to health care and specifically addresses the relationships between legal status, financial resources for health care, and access to care from such an international perspective. The author concludes that the failure to address immigrant health care in this larger international context ultimately impacts not only the individual immigrants, but their communities of origin and destination as well.

The Immigrant Health Care Narrative and What it Tells Us About the U.S. Health Care System ............... Brietta R. Clark, J.D. 229
This article examines the political, legal, and popular discourse in favor of and against healthcare benefit restrictions for immigrants. The author explains how this discourse creates narratives of immigrants' character and relationship to the rest of society. These narratives influence our perception of immigrants and their effect on society, and this perception, in turn, seems to influence the policies enacted to regulate immigrants and immigration. However, the author points out that immigrant-specific discourse or advocacy will not solve the fundamental problems of immigrant access to care and can serve to reinforce, rather than challenge, the fundamental defects of our health care system. Rather, this discourse can effectively serve to facilitate coalition building and advocacy to fight for meaningful and comprehensive healthcare reform that will benefit everyone.
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This comment argues that our current approach of limiting immigrant access to federal healthcare programs for the elderly is not only unjust, but also shortsighted. The author points out that many undocumented immigrants make significant tax contributions to the Medicare and Social Security programs. By not permitting undocumented immigrants to receive Medicare benefits associated with their contributions, the incentive for immigrants to contribute to Medicare will be eliminated and further strain will be placed on the Medicaid program. The author concludes that this policy approach will increase the costs to society of providing health care to an aging immigrant population and to our elderly population as a whole.

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